SEC 1972 (6/99)

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption.

Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



UNITED STATES
SECURITIES AND EXCHANGE COMMISSIONIVED
Washington, D.C. 20549

MAY 2 0 2002

OMB Number: 3235-0076
Expires: May 31, 2002

Estimated average burden

16.00

hours per response

OMB APPROVAL

FORM D

NOTICE OF SALE OF SECURIFIES
PURSUANT TO REGULATION B: 155
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXCEPTION

C		_
	SEC US	E ONLY
Prefix		Serial
	DATE RE	CEIVED
	1	

N	1 1 1 1 1 1 1 1	
Name of Offering (check if this is an ame	nament and name has changed, and indicate ch	ange.)
Class B Units and Convertible Notes		
Filing Under (Check box(es) that apply): \Box	Rule 504 □ Rule 505 ☑ Rule 506	☐ Section 4(6) ☐ ULOE
Type of Filing	endment	En
	A. BASIC IDENTIFICATION DATA	PROCESSED
1. Enter the information requested about the is	suer	
Name of Issuer (check if this is an amend	lment and name has changed, indicate change.)	D 11N \$ 2 2000
Inter-4 Limited Liability Company, a Califo	rnia Limited Liability Company	P JUN 1 3 2002
78 First Street, Sixth Floor, San Francisco, C	California 94105	(415) 771-4444 THOMSON
Address of Principal Business Operations (Nu	umber and Street, City, State, Zip Code)	Telephone Number
(if different from Executive Offices)		FINANCIAL
Brief Description of Business		
The issuer produces portable internet applia	nces.	
Type of Business Organization		
□ corporation □	limited partnership, already formed	☑ other (please specify):
☐ business trust ☐	limited partnership, to be formed	Limited Liability Company
	Month Year	
Actual or Estimated Date of Incorporation or O	rganization: 0 2 0 0	2 Actual □ Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbrevia	tion for State:
· · · · · · · · · · · · · · · · · · ·	CN for Canada; FN for other foreign	jurisdiction)
		<u>™ ₭ </u>

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77(d)(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at the address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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A. BASIC IDENTIFICATION	DATA							
2. Enter the information requested for the following:								
•Each promoter of the issuer, if the issuer has been organized within the past five years;								
•Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of								
equity securities of the issuer;								
•Each executive officer and director of corporate issuers and of corporat	e general and managing partners of partnership							
issuers; and								
•Each general and managing partner of partnership issuers.								
	utive Officer Director General and/or							
Full Name (Last name first, if individual)								
Radkey, Robert								
Business or Residence Address (Number and Street, City, State, Zip Code) 78 First Street, Sixth Floor, San Francisco, California 94105								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Execu	tive Officer							
Full Name (Last name first, if individual)								
Givens, Ronald								
Business or Residence Address (Number and Street, City, State, Zip Code)								
78 First Street, Sixth Floor, San Francisco, California 94105								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Execu	ntive Officer Director General and/or							
Full Name (Last name first, if individual)	Managing Partner							
Osterhout, Ralph								
Business or Residence Address (Number and Street, City, State, Zip Code)								
78 First Street, Sixth Floor, San Francisco, California 94105								
	ntive Officer							
	Managing Partner							
Full Name (Last name first, if individual)								
Rubenstein, Michael								
Business or Residence Address (Number and Street, City, State, Zip Code)								
2612 Jackson Street, San Francisco, California 94115 Check Box(es) that Apply: □ Promoter □ Beneficial Owner □ Execu	ntive Officer							
Check Box(cs) that Approx. In Fronticial Beneficial Owner In Execu	Managing Partner							
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Execu	itive Officer Director General and/or							
Full Name (Last name first, if individual)	Managing Partner							
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Check Box(es) that Apply: Promoter Beneficial Owner Execu	ntive Officer Director General and/or							
· · · · · · · · · · · · · · · · · · ·	Managing Partner							
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)	•							

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING		
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	No ☑
Answer also in Appendix, Column 2, if filing under ULOE.		
2. What is the minimum investment that will be accepted from any individual?	\$50	,000
3. Does the offering permit joint ownership of a single unit?	Yes	No ☑
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Not applicable.		
Full Name (Last name first, individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	🗆 A	ll States
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [[MT] [NE] [NV] [NH] [NV] [NC] [ND] [OH] [OK] [OR] [[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [ID] MO] PA] PR]	
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		11 C4 4
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [ID] MO] PA] PR]	.ll States
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	🗆 A	Il States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [ID] MO] PA] PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ <u>0</u> \$0	\$ <u>0</u> \$0
	Convertible Securities (including warrants) (Notes convertible into Class B membership interests	\$_1,000,000 \$0	\$ <u>150,000</u> \$ <u>0</u>
	(preferred) and warrants	\$ <u>14,000,000</u>	\$100,000
	Total	\$ <u>15,000,000</u>	\$250,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amoun of Purchases
	Accredited Investors	2_	\$250,000
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of	Dollar Amount Sold
	,	Security	Amount Sold
	Rule 505Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and securities in this offering. Exclude amounts relating solely to organization. The information may be given as subject to future contingencies. If the aris not known, furnish an estimate and check the box to the left of the estimate.	n expenses of the issuer. mount of an expenditure	
	Transfer Agent's Fees		\$
	Printing and Engraving Costs	🗖	\$ \$ 1,000
	Legal Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$ \$
	Other Expenses (identify) Total		\$

	C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES	AND USE OF PRO	CEEDS		
	b. Enter the difference between the aggregate of Part C - Question 1 and total expenses furnished 4.a. This difference is the "adjusted gross proceed	in response to Part C - Question	\$_24	19, 000		
5.	Indicate below the amount of the adjusted gross proposed to be used for each of the purposes sho is not known, furnish an estimate and check the botal of the payments listed must equal the adjust forth in response to Part C - Question 4.b. above.	wn. If the amount for any purpose pox to the left of the estimate. The ed gross proceeds to the issuer set	Payments to Officers, Directors, & Affiliates		Pay Oth	ments To ers
	Salaries and fees		\$		\$	
	Purchases of real estate		\$		\$	
	Purchase, rental or leasing and installation of m	achinery and equipment	\$		\$ <u></u>	
	Construction or leasing of plant buildings and fa	acilities	\$		\$	
	Acquisition of other businesses (including the v offering that may be used in exchange for the as issuer pursuant to a merger)	ssets or securities of another				
			\$		\$	
	Repayment of indebtedness		\$		\$	
	Working capital		\$		\$	209,000
	Other (specify) Expense Repayment		\$40,000		\$	
	Column Totals		\$ 40,000		\$	209,000
	Total Payments Listed (column totals added)			19,000		
fo	e issuer has duly caused this notice to be signed b llowing signature constitutes an undertaking by the its staff, the information furnished by the issuer to	e issuer to furnish the U.S. Securities	and Exchange Cor	nmission,	upon	written requ
Iss	suer (Print or Type)	Signature	aclkey	Date		
Na	ter-4 Limited Liability Company ume of Signer (Print or Type) obert Radkey	Title of Signer (Print or Type) President/Chief Operations Office		May 1	7, 200	12

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATU	UK	Ю
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provisions of such rule?		Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes □	No ☑
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See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Inter-4 Limited Liability Company		May 17, 2002
Name of Signer (Print or Type)	Title (Print or Type)	
Robert Radkey	President/Chief Operating Officer	

Instruction:

Print the name and title of the signing representative under this signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

, 1.	to non- investo (Part l	d to sell accredited rs in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqua under St (if yes explan waiver (Part E	5 lification ate ULOE , attach ation of granted) Item I)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		X	Class B Units \$100,000 Convertible Notes \$150,000	2	\$250,000				Х
CO									
CT									
DE									
DC									
FL									
GA									
HI									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
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MN									ļ
MS									<u> </u>
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APPENDIX

1,	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)		Disqua under St (if yes explan waiver (Part I	5 lification ate ULOE , attach aation of granted) C-Item I)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT									
NE									
NV									
NH									
NJ									
NM									
NY									
NC									
ND		,							
OH									
OK								-	
OR									
PA									
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA									
WA									
WV									
WI									
WY									
PR									